

St. Mary's School
Child's Record for Extended Day
2012-2013

Family Last Name: _____

List all children that will be attending Extended Day:

Student _____	_____ / _____ / _____	Student _____	_____ / _____ / _____
	Birthday Grade		Birthday Grade
Student _____	_____ / _____ / _____	Student _____	_____ / _____ / _____
	Birthday Grade		Birthday Grade

Parent or Guardian's home address and employment address;

Father

Name _____	Employer _____
Address _____	Address _____
City _____ Phone _____	City _____ Phone _____

Mother

Name _____	Employer _____
Address _____	Address _____
City _____ Phone _____	City _____ Phone _____

Persons to whom the child may be released by the caregiver:

Name _____	Name _____
Address _____	Address _____
City _____ Phone _____	City _____ Phone _____

Person who will take responsibility for the child in an emergency when the parent/guardian cannot be reached.

Name _____	Address _____
City _____	Phone _____

Consent to contact physician in emergency:

I understand that if a medical emergency arises the program staff will take all steps necessary to ensure the safety of my child. As necessary, a public emergency vehicle will be called to transport my child to the closest emergency facility. I also understand that I am responsible for any transportation and medical expenses incurred.

Signature of Parent/Guardian _____	Date _____
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(Please complete the back side)

Child's Medical Information

*****Write each child's name next to any condition that they may have:**

Child (ren's) Name(s): _____

Allergies/Medical concerns of which to be aware: _____

Medications needed at Extended Care YES NO

Name & Type of Medication: _____

Dosage & Times to be given: _____

Parent is responsible for providing medication to Extended Care in the original container with child's full name and directions clearly legible. A parent is responsible for providing any special instructions or equipment to staff (ex: inhaler, nebulizer, epi-pen, etc.) Medication/equipment and medical information for a student in the school office is NOT available to Extended Care before or after regular school hours.

Medications at Extended Care will be stored in a locked, secured site. Extended Care does NOT assume responsibility for reactions to medication brought to Extended Care. Extended Care also reserves the right to refuse to administer medications.

At the end of the school year, all medication not picked up by a parent will be disposed of after June 1st.

Physical limitations (glasses, hearing aid, crutches) _____

Any specific activities child should NOT engage in: _____

Company providing health and/or accident insurance coverage: _____

Parent Printed Name

Parent Signature

Date

903 West Mission Avenue
Bellevue, NE 68005-3998



Mrs. Cheryl Castle
Principal

Phone (402) 291-1694
Fax 402-291-9667

EXTENDED DAY PROGRAM 2011-2012 SCHOOL YEAR

St. Mary's offers an Extended Day Program available to all St. Mary's Students. The hours are 6:30 a.m. to 6:00 p.m.

Pre-Kindergartners may bring their own sack lunch or purchase a lunch from the school for \$2.35 or a milk ticket for \$4.00 (10 milks). Lunch is served in the Extended Day room.

Cost per child will be \$2.65 per hour with a yearly registration fee of \$5.00 per child. The family rate is \$2.65 for the first child; \$2.15 for the 2nd Child and \$1.65 for the third child. Each additional child is a \$1.65.

An additional late pick up fee will also be assessed after 6:00 p.m. After 6:00 p.m. the charge is \$1.00 for every minute.

When school is in session for a scheduled half day, Extended Day will be open. When school is not in session there will be no Extended Day Program. When school is closed early due to weather or other emergencies, your child must be picked up as soon as possible. On **Snow Days** there is **no** Extended Day.

The Extended Day billing is from the 1st through the 15th of the month and from the 16th through the last day of the month. The bill will be handed to you when you pick up your child on the school day following the 15th and the last day of the month. Due to school vacation, there will be a December 15th billing and the next billing will not be until January 15th. There will be a May 15th billing and the last billing will be mailed to you.

All bills must be paid within 30 days. If your payment is not made within 30 days of the billing date, your child will not be allowed to attend Extended Day until your bill has been paid in full.

If you are unable to meet your financial responsibility, you need to make an appointment with the Principal, Mrs. Castle by calling 291-1694.